



**LOST KEY REQUEST**

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NAME: \_\_\_\_\_ SSN: \_\_\_\_\_  
(LAST) (FIRST)

Date Lost: \_\_\_\_\_ Time Lost: \_\_\_\_\_ Approx. Location Where Key(s) Was Lost:

\_\_\_\_\_

Describe Efforts to Locate Key(s): \_\_\_\_\_

\_\_\_\_\_

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What Key(s) Was Lost: \_\_\_\_\_

\_\_\_\_\_

Restricted: Y/N Describe: \_\_\_\_\_

Was Capitol Police Notified: Yes \_\_\_\_\_ No \_\_\_\_\_

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Employee's Supervisor's Comments: \_\_\_\_\_

\_\_\_\_\_

Reissue: Yes/No Print Supervisor Name: \_\_\_\_\_

Employee's Supervisor Signature: \_\_\_\_\_

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Agency Administrator's Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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DFM USE

Reissue: Yes \_\_\_\_\_ No \_\_\_\_\_

Facilities Operations Manager Signature: \_\_\_\_\_

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Date reissued: \_\_\_\_\_ Reissued By: \_\_\_\_\_

Date Key(s) Found: \_\_\_\_\_ Returned To: \_\_\_\_\_